Effective January 1, 2003 0616 (96												
		SMALI TYPE	EN	(Π) <b>Υ</b>	OR	OTHER SMALL						
TOTAL CLAIMS			45				RAT	Ε	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS					.26		X\$ 9	)=	.ii.	OR	X\$18=	480
INDEPENDENT CLAIMS			6 minus 3 =		* 3		X42	X42=		OR	X84=	760
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT				1100	+140=			+280=	45 4
* 16	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2		TOTAL		OR	L	11.5-
CLAIMS AS AMENDED - PART II								<b>1</b>		OH	TOTAL	145
5	19/05	(Column 1)		(Column 2) (Column 3)			SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CLAIMS HIGH REMAINING NUM AFTER PREVI AMENDMENT PAID		BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 38	Minus	** . 4	45	=	X\$ 9	=		OR	X\$18=	
	Independent + 8		Minus		6	-2_	X42	<u>.</u>		OR	<b>X6</b> 4≅	400
_	FIRST PRESENTATION OF MULTIPLE DEPENDEN			(EAIM		+140			OR	+280=		
	$\psi$		9 90			TO ADDIT, F			OR	TOTAL ADDIT. FEE	act	
		(Column 1)	<u>.</u>	(Colur	nn 2)	(Column 3)	ADDII. F	CE 8			ADDII. PEEI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Indépendent	*	Minus	***	CLAIM		X42:	-		OR	X84= ·	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	= .	·	OR	+280=	
						TO' ADDIT, F	AL EE		OR	TOTAL ADDIT. FEE		
`.		(Column 1):	·	(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	tris		= .	X\$ 9	_		OR	X\$18=	, <u>- u</u>
	Independent	*	Minus	***		=	X42:				X84=	
- N	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The Highest Num	nber Previously Pa	d For" (Total or	Independ	ent) is the	highest numbe	er found in the	арр	ropriate box	in co	lumn į.	

\*U.S. Government Printing Office: 2003 - 498-278/69151

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